UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF MICHIGAN

In re:	§	Case No. 12-63510-TJT
DITED MEDICORD DIC	§	
INTERMEDCORP, INC.	8	
	8	
Debtor	§	

TRUSTEE'S FINAL REPORT (TFR)

The undersigned trustee hereby makes this Final Report and states as follows:

- 1. A petition under chapter <u>7</u> of the United States Bankruptcy Code was filed on <u>10/22/2012</u>. The undersigned trustee was appointed on <u>10/22/2012</u>.
- 2. The trustee faithfully and properly fulfilled the duties enumerated in 11 U.S.C. § 704.
- 3. All scheduled and known assets of the estate have been reduced to cash, released to the debtor as exempt property pursuant to 11 U.S.C. § 522, or have been or will be abandoned pursuant to 11 U.S.C. § 554. An individual estate property record and report showing the disposition of all property of the estate is attached as **Exhibit A**.

4.	The trustee realized gross receipts of	\$16,216.27
	Funds were disbursed in the following amounts:	
	Payments made under an interim distribution	\$0.00
	Administrative expenses	\$367.50
	Bank service fees	\$355.92
	Other Payments to creditors	\$0.00
	Non-estate funds paid to 3 rd Parties	\$0.00
	Exemptions paid to the debtor	\$0.00
	Other payments to the debtor	\$0.00
	Leaving a balance on hand of	\$15,492.85

The remaining funds are available for distribution.

5. Attached as **Exhibit B** is a cash receipts and disbursements record for each estate bank account.

UST Form 101-7-TFR (5/1/2011)

¹ The balance on funds on hand in the estate may continue to earn interest until disbursed. The interest earned prior to disbursements will be distributed pro rata to creditors within each priority category. The trustee may receive additional compensation not to exceed the maximum compensation set forth under 11 U.S.C. § 326(a) on account of the disbursement of the additional interest.

- 6. The deadline for filing non-governmental claims in this case was <u>06/26/2013</u> and the deadline for filing government claims was <u>04/20/2013</u>. All claims of each class which will receive a distribution have been examined and any objections to the allowance of claims have been resolved. If applicable, a claims analysis, explaining why payment on any claim is not being made, is attached as **Exhibit C**.
- 7. The Trustee's proposed distribution is attached as **Exhibit D**.
- 8. Pursuant to 11 U.S.C. § 326(a), the maximum compensation allowable to the trustee is \$2,371.63. The trustee voluntarily reduced his fees from \$2,371.63 to \$1,608.00 and waived his expenses. To the extent that additional interest is earned before case closing, the maximum compensation may increase.

The trustee has received $\underline{\$0.00}$ as interim compensation and now requests the reduced sum of $\underline{\$1,608.00}$, for a total compensation of $\underline{\$1,608.00}^2$. In addition, the trustee received reimbursement for reasonable and necessary expenses in the amount of $\underline{\$0.00}$, and now requests reimbursement for expenses of $\underline{\$0.00}$, for total expenses of $\underline{\$0.00}$.

Pursuant to Fed R Bank P 5009, I hereby certify, under penalty of perjury, that the foregoing report is true and correct.

Date: 12/12/2014 By: /s/ GENE R. KOHUT, TRUSTEE

Trustee

STATEMENT: This Uniform form is associated with an open bankruptcy case, therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.

UST Form 101-7-TFR (5/1/2011)

² If the estate is administratively insolvent, the dollar amounts reflected in this paragraph may be higher than the amounts listed in the Trustee's Proposed Distribution (Exhibit D).

INDIVIDUAL ESTATE PROPERTY RECORD AND REPORT ASSET CASES

Page No: Exhibit A

6

Asset Fully

Administered (FA) /

Gross Value of

Remaining Assets

FA

5

Sales/Funds

Received by the

Estate

/s/ GENE R. KOHUT, TRUSTEE

GENE R. KOHUT, TRUSTEE

\$4,216.27

4

Property

OA = § 554(a) abandon.

Abandoned

Case No.: 12-63510-TJT GENE R. KOHUT, TRUSTEE Trustee Name: INTERMEDCORP, INC. 10/22/2012 (f) Case Name: Date Filed (f) or Converted (c): For the Period Ending: 12/12/2014 §341(a) Meeting Date: 11/29/2012 06/26/2013 Claims Bar Date:

3

Estimated Net Value

(Value Determined by

Less Liens, Exemptions,

and Other Costs)

\$4,216.27

2

Petition/

Unscheduled

Value

\$100.00

Asset Description

(Scheduled and

Unscheduled (u) Property)

Initial Projected Date Of Final Report (TFR): Current Projected Date Of Final Report (TFR):

COMERICA BANK

Ref. #

1	COMERICA BANK		\$100.00	Ψ4,210.27	Ψ+,210.2	, I 171
	CHECKING					
2	VARIOUS OFFICE ART		\$600.00	\$0.00	\$0.0	0 FA
	LOCATION: 17197 LAUREL					
	PARK SUITE 521, LIVONIA					
	MI 48152					
3	MISC A/R		\$4,000.00	\$0.00	\$0.0	0 FA
4	SERVERS, COMPUTERS,		\$5,000.00	\$0.00	\$0.0	0 FA
	OFFICE DESK, MISC					
	OFFICE FURNITURE					
	LOCATION: 17197 LAUREL					
	PARK SUITE 521, LIVONIA					
	MI 48152					
5	JUDGMENT		\$90,000.00	\$0.00	\$0.0	0 FA
6	ACCOUNT RECEIVABLE	(u)	Unknown	\$0.00	\$0.0	0 FA
	OWED TO THE DEBTOR BY					
	JOANNE ORTOLAN IN THE					
	AMOUNT OF \$18,617.86					
Asset N	Notes: See Asset #9	'	•		·	
7	ACCOUNT RECEIVABLE	(u)	Unknown	\$0.00	\$0.0	0 FA
	OWED TO THE DEBTOR BY					
	JOHN MICALLEF IN THE					
	AMOUNT OF \$11,506.79					
Asset N	Notes: See Asset #9	·	•		·	•
8	CLAIM AGAINST JOANNE	(u)	Unknown	\$0.00	\$0.0	0 FA
	L. ORTOLAN					
Asset N	Notes: Adversary case 13-04302;	See Asse	t #9	,		
9	CLAIMS AGAINST JOANNE	(u)	Unknown	\$12,000.00	\$12,000.0	0 FA
	L. ORTOLAN, JOHN					
	MICALLEF AND PROMED					
	CONSULTING GROUP, INC.					
Asset N	Notes: adversary proceeding case	no. 13-04	1354-tjt		·	
TOTAI	S (Excluding unknown value)				Gross V	Value of Remaining Assets
			\$99,700.00	\$16,216.27	\$16,216.2°	
		_	Ψ22,100.00	φ10,210,27	\$10,210.2	, \$0.00

03/31/2015

12/12/2014

CASH RECEIPTS AND DISBURSEMENTS RECORD

Page No:1 Exhibit B

Case No. 12-63510-TJT Trustee Name: GENE R. KOHUT.

TRUSTEE

\$2,000,000.00

Case Name: INTERMEDCORP, INC.

Bank Name: Bank of Texas

Primary Taxpayer ID #: **-**3348 Checking Acct #: *****1826 Co-Debtor Taxpayer ID #: Account Title: CHECKING

For Period Beginning: 10/22/2012 Blanket bond (per case limit):

For Period Ending: 12/12/2014 Separate bond (if applicable):

For Period Endin	ıg:	12/12/2014	Separate bond (if applicable):				
1	2	3	4		5	6	7
Transaction Date	Check / Ref. #	Paid to/ Received From	Description of Transaction	Uniform Tran Code	Deposit \$	Disbursement \$	Balance
03/21/2013	(1)	COMERICA BANK	TURNOVER OF BANK ACCOUNT BALANCE	1149-000	\$4,216.27		\$4,216.27
04/09/2013	1001	CORE LITIGATION SUPPORT	INVOICE NO. 77209 Attendance Fee for Deposition of Joanne Ortolan	2990-000		\$167.50	\$4,048.77
04/12/2013		Bank of Texas	Account Analysis Fee	2600-000		\$2.41	\$4,046.36
04/30/2013		Bank of Texas	Account Analysis Fee	2600-000		\$6.46	\$4,039.90
05/31/2013		Bank of Texas	Account Analysis Fee	2600-000		\$6.51	\$4,033.39
06/28/2013		Bank of Texas	Account Analysis Fee	2600-000		\$6.29	\$4,027.10
07/31/2013		Bank of Texas	Account Analysis Fee	2600-000		\$10.00	\$4,017.10
08/04/2013	(9)	JOHN MICALLEF	COMPROMISE P/O 07/03/14	1249-000	\$7,000.00		\$11,017.10
08/30/2013		Bank of Texas	Account Analysis Fee	2600-000		\$15.94	\$11,001.16
09/30/2013		Bank of Texas	Account Analysis Fee	2600-000		\$17.17	\$10,983.99
10/08/2013	(9)	JOANNE L ORTOLAN	COMPROMISE P/O 07/03/14	1249-000	\$1,000.00		\$11,983.99
10/31/2013		Bank of Texas	Account Analysis Fee	2600-000		\$18.78	\$11,965.21
11/12/2013	(9)	JOANNE L ORTOLAN	COMPROMISE P/O 07/03/14	1249-000	\$1,000.00		\$12,965.21
11/29/2013		Bank of Texas	Account Analysis Fee	2600-000		\$19.35	\$12,945.86
12/31/2013		Bank of Texas	Account Analysis Fee	2600-000		\$20.89	\$12,924.97
01/31/2014		Bank of Texas	Account Analysis Fee	2600-000		\$20.85	\$12,904.12
02/28/2014		Bank of Texas	Account Analysis Fee	2600-000		\$18.80	\$12,885.32
03/31/2014		Bank of Texas	Account Analysis Fee	2600-000		\$20.79	\$12,864.53
04/30/2014		Bank of Texas	Account Analysis Fee	2600-000		\$20.08	\$12,844.45
05/30/2014		Bank of Texas	Account Analysis Fee	2600-000		\$20.72	\$12,823.73
06/02/2014	1002	The Graves Group, LLC	Mediation Fee	2990-000		\$200.00	\$12,623.73
06/30/2014		Bank of Texas	Account Analysis Fee	2600-000		\$19.80	\$12,603.93
07/30/2014	(9)	JOANNE L ORTOLAN	COMPROMISE P/O 07/03/14	1249-000	\$1,000.00		\$13,603.93
07/31/2014		Bank of Texas	Account Analysis Fee	2600-000		\$20.33	\$13,583.60
08/27/2014	(9)	JOANNE L ORTOLAN	COMPROMISE P/O 07/03/14	1249-000	\$1,000.00		\$14,583.60
08/29/2014		Bank of Texas	Account Analysis Fee	2600-000		\$21.65	\$14,561.95
09/15/2014	(9)	JOANNE L ORTOLAN	NSF	1249-000	\$1,000.00		\$15,561.95
09/30/2014		Bank of Texas	Account Analysis Fee	2600-000		\$21.89	\$15,540.06
10/07/2014	(9)	DEP REVERSE: JOANNE L ORTOLAN	NSF	1249-000	(\$1,000.00)		\$14,540.06
10/31/2014		Bank of Texas	Account Analysis Fee	2600-000		\$23.46	\$14,516.60
11/07/2014	(9)	TALMER BANK & TRUST	COMPROMISE P/O 07/03/14 (to correct NSF)	1249-000	\$1,000.00		\$15,516.60
11/28/2014		Bank of Texas	Account Analysis Fee	2600-000		\$23.75	\$15,492.85

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CASH RECEIPTS AND DISBURSEMENTS RECORD

12-63510-TJT Case No. **Trustee Name:**

GENE R. KOHUT,

TRUSTEE

INTERMEDCORP, INC. Case Name:

Bank Name: Checking Acct #: Bank of Texas *****1826

Primary Taxpayer ID #:

-*3348

\$15,492.85

Co-Debtor Taxpayer ID #:

Account Title: 10/22/2012

CHECKING \$2,000,000.00

For Period Beginning: For Period Ending:

12/12/2014

Blanket bond (per case limit):

eparate	bond	(if app	licable):

1	2	3	4		5	6	7
Transaction Date	Check / Ref. #	Paid to/ Received From	Description of Transaction	Uniform Tran Code	Deposit \$	Disbursement \$	Balance

TOTALS: \$16,216.27 \$723.42 \$0.00 \$0.00 Less: Bank transfers/CDs \$723.42 Subtotal \$16,216.27 Less: Payments to debtors \$0.00 \$0.00 Net \$16,216.27 \$723.42

For the period of <u>10/22/2012</u> to <u>12/12/2014</u>

For the entire history of the account between <u>03/19/2013</u> to <u>12/12/2014</u>

Total Compensable Receipts: Total Non-Compensable Receipts: Total Comp/Non Comp Receipts: Total Internal/Transfer Receipts:	\$16,216.27 \$0.00 \$16,216.27 \$0.00	Total Compensable Receipts: Total Non-Compensable Receipts: Total Comp/Non Comp Receipts: Total Internal/Transfer Receipts:	\$16,216.27 \$0.00 \$16,216.27 \$0.00
Total Compensable Disbursements: Total Non-Compensable Disbursements: Total Comp/Non Comp Disbursements: Total Internal/Transfer Disbursements:	\$723.42 \$0.00 \$723.42 \$0.00	Total Compensable Disbursements: Total Non-Compensable Disbursements: Total Comp/Non Comp Disbursements: Total Internal/Transfer Disbursements:	\$723.42 \$0.00 \$723.42 \$0.00

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GENE R. KOHUT,

CASH RECEIPTS AND DISBURSEMENTS RECORD

12-63510-TJT Case No. **Trustee Name:**

TRUSTEE

INTERMEDCORP, INC. Case Name: Bank Name: **-***3348 Primary Taxpayer ID #: Checking Acct #: Bank of Texas *****182<u>6</u>

Co-Debtor Taxpayer ID #: For Period Beginning:

Account Title: 10/22/2012

CHECKING \$2,000,000.00

For Period Ending: 12/12/2014 Separate bond (if applicable):

	1	2	3	4		5	6	7
1	Transaction Date	Check / Ref. #	Paid to/ Received From	Description of Transaction	Uniform Tran Code	Deposit \$	Disbursement \$	Balance

TOTAL -	- ALL ACCOUNTS	NET DEPOSITS	NET DISBURSE	ACCOUNT BALANCES
		\$16,216.27	\$723.42	\$15,492.85

Blanket bond (per case limit):

For the period of <u>10/22/2012</u> to <u>12/12/2014</u>

For the entire history of the case between $\ \underline{10/22/2012}$ to $\ \underline{12/12/2014}$

Total Compensable Receipts: Total Non-Compensable Receipts: Total Comp/Non Comp Receipts: Total Internal/Transfer Receipts:	\$16,216.27 \$0.00 \$16,216.27 \$0.00	Total Compensable Receipts: Total Non-Compensable Receipts: Total Comp/Non Comp Receipts: Total Internal/Transfer Receipts:	\$16,216.27 \$0.00 \$16,216.27 \$0.00
Total Compensable Disbursements: Total Non-Compensable Disbursements: Total Comp/Non Comp Disbursements: Total Internal/Transfer Disbursements:	\$723.42 \$0.00 \$723.42 \$0.00	Total Compensable Disbursements: Total Non-Compensable Disbursements: Total Comp/Non Comp Disbursements: Total Internal/Transfer Disbursements:	\$723.42 \$0.00 \$723.42 \$0.00

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Case No. 12-63510-TJT Trustee Name: GENE R. KOHUT, TRUSTEE

Case Name: INTERMEDCORP, INC.

Date: 12/12/2014

Claims B	ar Date: <u>06/26/2013</u>								
Claim No.:	Creditor Name	Claim Class	Claim Status	Uniform Tran Code	Amount Allowed	Amount Paid	Interest	Tax	Net Remaining Balance
1	DICKINSON WRIGHT PLLC	Personal Prop and Intang - Consensual	Disallowed	4210-000	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	c/o James A. Plemmons, Esq. 500 Woodward Avenue, Suite 4000								
Claim N	Detroit MI 48226 otes: Legal services; Dis	allowed P/O 03/27	2/13						
4	IRS - SBSE/INSOLVENCY UNIT	Real Property Tax Liens (pre-petiti	Allowed	4700-000	\$13,483.19	\$0.00	\$0.00	\$0.00	\$13,483.19
	Box 330500-Stop 15 Detroit MI 48232	VI I							
la	DICKINSON WRIGHT PLLC	General Unsecured 726(a)(2)	Disallowed	7100-000	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	c/o James A. Plemmons, Esq. 500 Woodward Avenue, Suite 4000								
	Detroit MI 48226	(22/12							
Claim N			4.11 1	7100 000	Φ 7 5 (0 7 0 7 0	#0.00	#0.00 l	Ф0.00	Φ 7 5 (0 7 0 7 0
2	CARSON CITY HEALTH SYSTEM	General Unsecured 726(a)(2)	Allowed	7100-000	\$756,878.72	\$0.00	\$0.00	\$0.00	\$756,878.72
	Carson City Hospital 406 E. Elm Street Carson City MI 48811								
Claim N	1				Ø107 122 04	#0.00	#0.00 l	Ф0 00	#106 122 04
3	BIRMINGHAM ROYAL OAK MEDICAL c/o Robert Bassel POBox T Clinton MI 49236	General Unsecured 726(a)(2)	Allowed	7100-000	\$186,122.84	\$0.00	\$0.00	\$0.00	\$186,122.84
Claim N		uced amount of \$1	86,122.84 P/C	0 07/03/14					
5	LOP III HOLDING	General	Allowed	7100-000	\$36,669.70	\$0.00	\$0.00	\$0.00	\$36,669.70
	COMPANY, LLC	Unsecured 726(a)(2)					\$3.30		,
	Silverman & Morris, PLLC 30500 Northwestern Hwy., #200								
	Farmington Hills MI 48334								
	1	1			I.	L		I	J

\$993,154.45

\$0.00

\$0.00

\$0.00

\$993,154.45

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Case No. 12-63510-TJT Trustee Name: GENE R. KOHUT, TRUSTEE

Case Name: INTERMEDCORP, INC.

Date: 12/12/2014

Claims Bar Date: <u>06/26/2013</u>

CLAIM CLASS SUMMARY TOTALS

Claim Class	Claim Amount	Amount Allowed	Amount Paid	Interest	Tax	Net Remaining Balance
General Unsecured 726(a)(2)	\$1,090,338.09	\$979,671.26	\$0.00	\$0.00	\$0.00	\$979,671.26
Personal Prop and Intang - Consensual	\$62,576.81	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Real Property Tax Liens (pre-petiti	\$13,483.19	\$13,483.19	\$0.00	\$0.00	\$0.00	\$13,483.19

Exhibit D

TRUSTEE'S PROPOSED DISTRIBUTION

Case No.: 12-63510-TJT

Case Name: INTERMEDCORP, INC. Trustee Name: GENE R. KOHUT, TRUSTEE

Balance on hand: \$15,492.85

Claims of secured creditors will be paid as follows:

Claim No.	Claimant	Claim Asserted	Allowed Amount of Claim	Interim Payments to Date	Amount
4	IRS - SBSE/Insolvency Unit	\$13,483.19	\$13,483.19	\$0.00	\$6,604.07

Total to be paid to secured creditors:

Remaining balance:

\$6,604.07
\$8,888.78

Applications for chapter 7 fees and administrative expenses have been filed as follows:

Reason/Applicant	Total Requested	Interim Payments to Date	Proposed Payment
GENE R. KOHUT, TRUSTEE, Trustee Fees The Trustee voluntarily reduced his fees from \$2,371.63 to \$1,608.00	\$1,608.00	\$0.00	\$1,608.00
GOLD, LANGE & MAJOROS, P.C., Attorney for Trustee Fees The Attorneys for Trustee voluntarily reduced their fees from \$25,823.00 to \$6,500.00	\$6,500.00	\$0.00	\$6,500.00
GOLD, LANGE & MAJOROS, P.C., Attorney for Trustee Expenses	\$194.78	\$0.00	\$194.78
UNITED STATES BANKRUPTCY COURT, Clerk of the Court Costs	\$586.00	\$0.00	\$586.00

Total to be paid for chapter 7 administrative expenses:	\$8,888.78
Remaining balance:	\$0.00

Applications for prior chapter fees and administrative expenses have been filed as follows: NONE

Total to be paid to prior chapter administrative expenses:	\$0.00
Remaining balance:	\$0.00

In addition to the expenses of administration listed above as may be allowed by the Court, priority claims totaling \$0.00 must be paid in advance of any dividend to general (unsecured) creditors.

Allowed priority claims are: NONE

Total to be paid to priority claims:	\$0.00
Remaining balance:	\$0.00

The actual distribution to wage claimants included above, if any, will be the proposed payment less applicable withholding taxes (which will be remitted to the appropriate taxing authorities).

Timely claims of general (unsecured) creditors totaling \$979,671.26 have been allowed and will be paid <u>pro rata</u> only after all allowed administrative and priority claims have been paid in full. The timely allowed general (unsecured) dividend is anticipated to be 0.0 percent, plus interest (if applicable).

Timely allowed general (unsecured) claims are as follows:

Claim No.	Claimant	Allowed Amt. of Claim	Interim Payments to Date	Amount
2	Carson City Health System	\$756,878.72	\$0.00	\$0.00
3	Birmingham Royal Oak Medical	\$186,122.84	\$0.00	\$0.00
5	LOP III HOLDING COMPANY, LLC	\$36,669.70	\$0.00	\$0.00

Total to be paid to timely general unsecured claims:	\$0.00
Remaining balance:	\$0.00

Tardily filed claims of general (unsecured) creditors totaling \$0.00 have been allowed and will be paid <u>pro rata</u> only after all allowed administrative, priority and timely filed general (unsecured) claims have been paid in full. The tardily filed claim dividend is anticipated to be 0.0 percent, plus interest (if applicable).

Tardily filed general (unsecured) claims are as follows: NONE

Total to be paid to tardily filed general unsecured claims:	\$0.00
Remaining balance:	\$0.00

Subordinated unsecured claims for fines, penalties, forfeitures, or damages and claims ordered subordinated by the Court totaling \$0.00 have been allowed and will be paid <u>pro rata</u> only after all allowed administrative, priority and general (unsecured) claims have been paid in full. The dividend for subordinated unsecured claims is anticipated to be 0.0 percent, plus interest (if applicable).

Subordinated unsecured claims for fines, penalties, for feitures or damages and claims ordered subordinated by the Court are as follows: $\ensuremath{\mathsf{NONE}}$

Total to be paid for subordinated claims:	\$0.00
Remaining balance:	\$0.00